

*Submitted electronically to regulations.gov*

Feb 2, 2026

The Honorable Martin A Makary M.D., M.P.H.  
Commissioner  
Food and Drug Administration  
Department of Health and Human Services  
Re: Docket No. FDA-2025-N-4731  
10903 New Hampshire Avenue  
Silver Spring, MD 20993

**Re: [Increasing Access to Nonprescription Drugs; Request for Information](#)**

Dr. Makary,

The National Community Pharmacists Association (NCPA) appreciates the opportunity to provide comments to FDA's request for information (RFI) on increasing access to nonprescription drugs.

NCPA represents America's community pharmacists, including 18,900 independent community pharmacies. Almost half of all community pharmacies provide long-term care services and play a critical role in ensuring patients have immediate access to medications in both community and long-term care (LTC) settings. Together, our members employ 205,000 individuals, and provide an expanding set of healthcare services to millions of patients every day. Our members are small business owners who are among America's most accessible healthcare providers.

**7. Are there specific diseases or conditions that have not, traditionally, been treated with nonprescription drugs for which nonprescription drugs could be safely and effectively used without the supervision of a licensed healthcare practitioner?**

NCPA suggests that some drugs treating the following conditions could be administered as non-prescription drug safely and effectively without the supervision of a licensed healthcare practitioner:

- Acid reflux;
- Anaphylaxis
- Arthritis;
- Burns;
- Cold sores;
- Eczema
- Gingivitis;
- Hair loss

- Head lice and scabies;
- Nasal congestion;
- Nausea/vomiting; and
- Opioid overdose

NCPA suggests that the following should not be administered as non-prescription without the supervision of a licensed healthcare practitioner:

- **Certain albuterol inhalers** for asthma, bronchitis, emphysema, and other lung diseases;
- **Certain blood pressure management drugs;**
- **Certain contraceptives.** For example, pharmacists can prescribe contraception in various states, and patients benefit from such supervision and guidance. But several of our pharmacists have stated that they rarely see patients ask for Opill since it has become available over-the-counter (OTC), suggesting that simply making a drug OTC does not automatically improve access;
- **Certain flu and pneumonia drugs** could be more readily available after pharmacist point-of-care testing (POCT) confirms infection, and with the supervision of a pharmacist;
- **Certain migraine products.** Patients can often wait years to get a specialist/neurologist appointment for migraines.
- **Certain onychomycosis drugs;**
- **Certain overactive bladder agents.** However, some of the side effects with overactive bladder agents are not ideal for older adults, the main patient population. For example, many of these agents can cause dizziness/drowsiness, leading to risk of falls and confusion.
- **Certain smoking cessation drugs; and**
- **Certain urinary tract infection treatment drugs.** Antibiotics, given concerns with overutilization, higher resistance and harder to treat infections, are best used with provider involvement.

### **Additional Patient Concerns**

Additionally, there will likely be significant patient confusion of the same product being available both for prescription and OTC. Insurance plans may also stop covering the products once they are no longer prescription-only, which will contribute to greater out-of-pocket costs for patients and possible medication adherence/access issues.

**Ideally, any non-prescription class of drugs should leverage the expertise of the pharmacist by being available only from state licensed pharmacies where pharmacists can assist with the necessary assessment processes for determining whether a particular medication is appropriate for the individual seeking the therapy.**

NCPA also strongly recommends FDA review and recommend pathways to promote the utilization of pharmacists authorized by their states to safely initiate/prescribe the above

medications, which would help achieve FDA's goal to ensure greater access to these medications while also protecting patient safety.

NCPA thanks FDA for the opportunity to provide feedback, and we stand ready to work with the agency to offer possible solutions and ideas. Please let us know how we can assist further, and should you have any questions or concerns, please feel free to contact me at [steve.postal@ncpa.org](mailto:steve.postal@ncpa.org) or (703) 600-1178.

Sincerely,

A handwritten signature in black ink, appearing to read 'Steve Postal', with a long horizontal line extending to the right.

Steve Postal, JD  
Senior Director, Policy & Regulatory Affairs  
National Community Pharmacists Association